

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/627,106
Filing Date	April 19, 2004
First Named Inventor	Gopi M. Venkatesh, et al.
Art Unit	1618
Examiner Name	Jagadishwar Rao Samala
Total Number of Pages In This Submission	12
Attorney Docket Number	451194-00107

Total Number of Pages In This Submission

Attorney Docket Number

451194-00107

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	

Remarks

The Commissioner is hereby authorized to charge any additional fees required (including the fee for any extension of time), or to credit any overpayment, to Deposit Account No. 20-0609.

<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input type="checkbox"/> Other Enclosure(s) (please identify below):

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name Thompson Hine LLP, P.O. Box 8801, Dayton, Ohio 45401-8801

Signature s/John F. Kane

Printed name John F. Kane

Date 4/10/2007 Reg. No. 44,815

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature s/ John F. Kane

Typed or printed name John F. Kane Date 4/10/2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.